

No. of Copies Received	5
DISTRIBUTION	
NTA FE	1
L.E.	
S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL 1 GAS
OPERATOR	2
REGISTRATION OFFICE	
OPERATOR	

**NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS**

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

**Cotton Petroleum Corporation**  
 Address: **717 17th Street, Suite 2200, Denver, Colorado 80202**  
 Reason(s) for filing (Check proper box)  
 New Well  Change in Transporter of:  
 Oil  Dry Gas   
 Completion  Casinghead Gas  Condensate   
 Change in Ownership

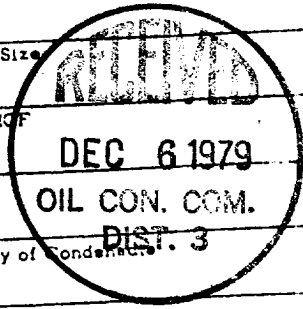
**DESCRIPTION OF WELL AND LEASE**  
 Lease Name: **Apache** Well No.: **117** Pool Name, including Formation: **Lindrith Gallup-Dakota West** Kind of Lease: **Jicarilla** Lease No.: **126**  
 Location: Unit Letter **A**; **660** Feet From The **North** Line and **1980** Feet From The **West**  
 Line of Section **12** Township **24 North** Range **4 West**, NMPM, **Rio Arriba** County

**DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS**  
 Name of Authorized Transporter of Oil  or Condensate   
**Permian Corporation** Address (Give address to which approved copy of this form is to be sent)  
**P. O. Box 1702, Farmington, New Mexico 87401**  
 Name of Authorized Transporter of Casinghead Gas  or Dry Gas   
 Address (Give address to which approved copy of this form is to be sent)  
 If well produces oil or liquids, give location of tanks. Unit **A** Sec. **12** Twp. **24N** Rge. **4W** Is gas actually connected?  When

If this production is commingled with that from any other lease or pool, give commingling order number:  
**COMPLETION DATA**  
 Designate Type of Completion - (X)  Oil Well  Gas Well  New Well  Workover  Deepen  Plug Back  Same Res'v.  Diff. Res'v.   
 Date Spudded \_\_\_\_\_ Date Compl. Ready to Prod. \_\_\_\_\_ Total Depth \_\_\_\_\_ P.B.T.D. \_\_\_\_\_  
 Elevations (DF, RKB, RT, GR, etc.) \_\_\_\_\_ Name of Producing Formation \_\_\_\_\_ Top Oil/Gas Pay \_\_\_\_\_ Tubing Depth \_\_\_\_\_  
 Perforations \_\_\_\_\_ Depth Casing Shoe \_\_\_\_\_

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

**TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL** (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)  
 Date First New Oil Run To Tanks \_\_\_\_\_ Date of Test \_\_\_\_\_ Producing Method (Flow, pump, gas lift, etc.) \_\_\_\_\_  
 Length of Test \_\_\_\_\_ Tubing Pressure \_\_\_\_\_ Casing Pressure \_\_\_\_\_ Choke Size \_\_\_\_\_  
 Actual Prod. During Test \_\_\_\_\_ Oil-Bbls. \_\_\_\_\_ Water-Bbls. \_\_\_\_\_ Gas-MCF \_\_\_\_\_



**GAS WELL**  
 Actual Prod. Test-MCF/D \_\_\_\_\_ Length of Test \_\_\_\_\_ Bbls. Condensate/MCF \_\_\_\_\_ Gravity of Condensate \_\_\_\_\_  
 Testing Method (pilot, back pr.) \_\_\_\_\_ Tubing Pressure (shut-in) \_\_\_\_\_ Casing Pressure (shut-in) \_\_\_\_\_ Choke Size \_\_\_\_\_

**I. CERTIFICATE OF COMPLIANCE**  
 I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  
**D. E. Wood** (Signature)  
 Division Production Manager (Title)  
 December 3, 1979 (Date)

**OIL CONSERVATION COMMISSION**  
 APPROVED \_\_\_\_\_, 19\_\_\_\_  
 BY Original Signed D. A. R. Hendrick  
 TITLE \_\_\_\_\_  
 This form is to be filed in compliance with RULE 1104.  
 If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
 All sections of this form must be filled out completely for allowable on new and recompleted wells.  
 Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.